

## **IMMEDIATE RELEASE**

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# **Kansas Submits Formal Section 1115 Waiver Application Following Public Comment Period**

**TOPEKA** - The State of Kansas on Monday submitted its formal proposal for implementing KanCare through the Centers for Medicare and Medicaid Services (CMS) Section 1115 waiver application process. This application follows additional public meetings and further consultation with representatives of the tribal governments and Indian Health Service (IHS) entities held in June and July.

Kansas Lt. Governor Jeff Colyer, M.D. said the public comment period, which ended July 14, and the additional consultation with the sovereign nations have been especially valuable in finalizing Kansas' application for the Section 1115 waiver.

"The goal with KanCare is to strengthen the coordination of care provided to Medicaid consumers in order to improve health outcomes, thus managing the cost of this safety net that's critical for so many Kansans," Dr. Colyer said. "Through further talks with tribal leaders, our updated application now includes presumptive enrollment and an opt-out feature for American Indians and Alaska Natives."

Colyer said the state will continue to seek feedback and input on KanCare through the external stakeholder workgroups and the Advisory Council.

KanCare is Governor Sam Brownback's plan to reform the state's Medicaid system through innovative solutions that will sustain this \$3 billion safety net. The state is leveraging private-sector experience while maintaining policy and hands-on oversight of the Kansas Medicaid program to ensure improved outcomes and sustainable growth.

"Compared to old Medicaid, KanCare will offer needy Kansans three vibrant options for integrated care and value-added services. KanCare will provide expanded coverage for dental care, heart transplants and bariatric services. With KanCare, members will be able to choose the plan that works best for their families. We're able to make these improvements without cutting provider rates or changing eligibility requirements," Dr. Colyer said.

It is estimated that KanCare will save more than \$1 billion during the next five years.

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Part of the administration's time line for implementing KanCare by January 2013 is a robust educational campaign, which includes face-to-face meetings with consumers and providers in dozens of cities around the state. The collaboration with stakeholders—consumers, providers and advocates—to reinvent Medicaid in Kansas began 18 months ago with statewide public forums that helped the state identify what stakeholders hope to achieve with Medicaid reform. Their high-priority list included integrated, whole-person care and enhanced community-based services, which have become two of the hallmarks of KanCare.

Kansas Department of Health and Environment and the Kansas Department for Aging and Disability Services conducted their first tour of educational meetings last week with Medicaid providers and consumers in eight cities throughout all regions of the state. Additional and follow-up educational meetings are being scheduled now.

Ahead of today's formal submission, the State submitted a concept paper on Jan. 26 and an informal demonstration application on April 26. Public comments were solicited with all three documents submitted to CMS.

To see the public comments submitted on the Section 1115 waiver application, visit KDHE's KanCare page at <http://www.kdheks.gov/hcf/kancare/>.

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